

STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH



J. Robert Galvin, M.D., M.P.H., M.B.A.
Commissioner

M. Jodi Rell
Governor

September 2, 2008

State of Connecticut
General Assembly
State Capitol
Hartford, CT 06106

Attention: Smart Growth Task Force, Regional Efficiency Subcommittee
Representative Tom Reynolds
Representative Vincent Cadelora
Mr. Mark Paquette

Dear Representatives Reynold and Cadelora and Mr. Paquette:

Thank you for the opportunity to comment regarding the Smart Growth Task Force's Regional Efficiency Subcommittees efforts to encourage regional cooperation, strengthen regional planning organizations, promote efficient land use and achieve efficiencies in the delivery of municipal services.

The Department of Public Health has several on-going efforts to encourage regionalization efforts throughout the state. Our Agency has found that by providing motivation and encouragement, municipalities are more receptive to working together to maximize services. For example, rather than making it a state mandate, DPH offered "transitional grants" to existing Part-time Health Departments to explore the possibility of moving to full time services. The grants were offered in two parts. Initial funding was used by the municipality to conduct a needs assessment relative to public health and to explore partnership opportunities with existing Regional Districts Departments of Public Health. Then, if the existing Part-Time Department of Health either joined an existing District or formed a new Full-Time or District Local Health Department, the second portion of the "transitional grant" was provided to the town. (Often times this grant funding was used to offset costs associated with joining the new local health department.) In addition, upon becoming a Full-Time or District Department of Public Health, that entity was eligible for the higher per capita reimbursement rate that already exists in Connecticut General Statute. Many municipalities have found through the needs assessment process that there is a more cost effective way to provide expanded services to their populations.

The concept of regionalization is used on a daily basis in the planning and provision of emergency services and homeland security. Connecticut has five EMS regional councils that are partners with the Connecticut Department of Public Health and help to implement state EMS policy and programs at the regional and local level. The councils are involved in providing technical assistance to towns and cities in their areas to create local EMS system plans. Each council employs a regional coordinator who assists EMS provider organizations with applications, courses and presents local issues to the state Office of Emergency Medical Services and the State EMS Advisory Board. These councils have been in service since 1974 and are aligned with the Department of Emergency Management and Homeland Security's Regional Emergency Management Coordinators. In addition, the CT Department of Public Health partners with our sister agency, the CT Department of Emergency Management and Homeland Security, to using the existing 5 planning regions for Homeland security planning. ***We are also funding 5 Public Health Planning Regions to foster joint Health and Emergency Preparedness Planning.***



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Page 2

September 2, 2008

The above examples of regional planning have been in existence for many years and have a successful track record. The Department continues to strive towards future regional planning efforts as opportunities become available. We look forward to working with you as you continue your efforts in this arena.

Sincerely,

A handwritten signature in black ink, appearing to read "J. Robert Galvin" followed by "M.D., M.P.H., M.B.A." in a cursive script.

J. Robert Galvin, M.D., M.P.H., M.B.A.
Commissioner